

Mississippi Electronic Courts
Twelfth Circuit Court District (Forrest Circuit Court)
CIVIL DOCKET FOR CASE #: 18CI1:20-cv-00181

BRICE v. DISMAS CHARITIES PROPERTIES, INC. et al
Assigned to: Robert Helfrich

Date Filed: 12/17/2020
Current Days Pending: 39
Total Case Age: 39
Jury Demand: None
Nature of Suit: Negligence - Motor
Vehicle (182)

Upcoming Settings:

None Found

Plaintiff

ALLEN BRICE

represented by **Brigg Hails Austin**
Morris Bart LLC
Morris Bart LLC
1712 15th St., suite 300
GULFPORT, MS 39501
228-574-4122
Fax: 228-400-1592
Email: baustin@morrisbart.com
ATTORNEY TO BE NOTICED

V.

Defendant

**DISMAS CHARITIES
PROPERTIES, INC.**

Defendant

DISMAS CHARITIES, INC.

Defendant

DISMAS EMPLOYEES "A" & "B"

Date Filed	#	Docket Text
12/17/2020	<u>1</u>	Civil Cover Sheet. (Crowe, Rhonda) (Entered: 12/17/2020)
12/17/2020	<u>2</u>	COMPLAINT against DISMAS CHARITIES PROPERTIES, INC., DISMAS CHARITIES, INC., DISMAS EMPLOYEES "A" & "B", filed by ALLEN BRICE. (Crowe, Rhonda) (Entered: 12/17/2020)
12/17/2020	<u>3</u>	SUMMONS Issued to DISMAS CHARITIES PROPERTIES, INC., DISMAS CHARITIES, INC.. (Crowe, Rhonda) (Entered: 12/17/2020)

12/22/2020	<u>4</u>	NOTICE OF SERVICE of Interrogatories Propounded to Dismas Charities Properties, Inc., NOTICE OF SERVICE of Request for Production of Documents Propounded to Dismas Charities Properties, Inc. by ALLEN BRICE. (Austin, Brigg) (Entered: 12/22/2020)
12/29/2020	<u>5</u>	SUMMONS Returned Executed by ALLEN BRICE. Re: ** <u>3</u> SUMMONS Issued to DISMAS CHARITIES PROPERTIES, INC., DISMAS CHARITIES, INC.. (Crowe, Rhonda)** DISMAS CHARITIES PROPERTIES, INC. served on 12/26/2020, answer due 1/25/2021. Service type: Certified Mail (Attachments: # <u>1</u> Exhibit USPS Receipt,) (Austin, Brigg) (Entered: 12/29/2020)

MEC Service Center			
Transaction Receipt			
01/25/2021 14:15:27			
You will be charged \$0.20 per page to view or print documents.			
MEC Login:	rt8188M	Client Code:	20826.21001
Description:	Docket Report	Search Criteria:	18CI1:20-cv-00181
Billable Pages:	2	Cost:	0.40

IN THE CIRCUIT COURT OF FORREST COUNTY, MISSISSIPPI

**DANIELLE SLADE AND
DAVID THOMAS, III**

PLAINTIFFS

v.

CAUSE NO. 20-180

**FORREST COUNTY MISSISSIPPI
FIRE DISTRICT; STEVE JACOB ALBRIGHT;
AND JOHN DOES 1-5**

DEFENDANTS

SUMMONS

THE STATE OF MISSISSIPPI

**TO: David Hogan, President
Forrest County Board of Supervisors
Forrest County, MS Fire District
641 Main Street
Hattiesburg, MS 39401,
or **WHEREVER FOUND****

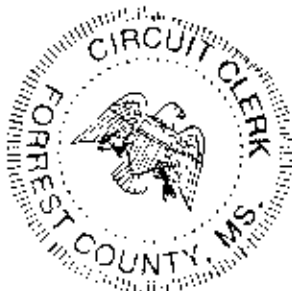
**THE COMPLAINT, INTERROGATORIES, REQUESTS FOR PRODUCTION OF DOCUMENTS,
AND REQUESTS FOR ADMISSIONS WHICH ARE ATTACHED TO THIS SUMMONS ARE
IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.**

You are required to mail or hand deliver a copy of a written response to the Complaint, Interrogatories, Requests for Production of Documents, and Requests for Admissions to Cory N. Ferraez, Holmes, McLelland & Ferraez, PLLC, 601 East Central Avenue, Petal, Mississippi 39465, attorney for the Plaintiff. Your response to the Complaint must be mailed or delivered within thirty (30) days from the date of delivery of this Summons and Complaint or a judgment by default will be entered against you for the money or other things demanded in the Complaint. You must also file the original of your response with the Clerk of this Court within a reasonable time afterward. According to the Mississippi Rules of Civil Procedure, your response to all Interrogatories, Requests for Production of Documents, and Requests for Admissions/discovery must be mailed or delivered within forty-five (45) days from the date of delivery of this Summons, Complaint, and discovery.

Issued under my hand and seal of said Court, this 16 day of December, 2020.

FORREST COUNTY CIRCUIT CLERK

BY: [Signature] **D.C.**



Case 1:20-cv-00181 Document 1-1 Filed 12/17/20 Page 2 of 4

COVER SHEET

Civil Case Filing Form

(To be completed by Attorney/Party
Prior to Filing of Pleading)

Court Identification Docket #

Case Filed

Docket Number

County #	Judicial District	Court ID
Month	Date	Year

DEC 17 2020

Docket Number
Local Docket ID

FORREST COUNTY CIRCUIT CLERK

Mississippi Supreme Court
Administrative Office of Courts

Form AOC/01
(Rev 2016)

This area to be completed by clerk

Case Number if filed prior to 1/1/94

In the CIRCUIT

Court of FORREST

County - FORST

Judicial District

Origin of Suit (Place an "X" in one box only)

<input checked="" type="checkbox"/> Initial Filing	<input type="checkbox"/> Reinstated	<input type="checkbox"/> Foreign Judgment Enrolled	<input type="checkbox"/> Transfer from Other court	<input type="checkbox"/> Other
<input type="checkbox"/> Remanded	<input type="checkbox"/> Reopened	<input type="checkbox"/> Joining Suit/Action	<input type="checkbox"/> Appeal	

Plaintiff - Party Initially Bringing Suit Should Be Entered First - Enter Additional Plaintiffs on Separate Form

Individual	Brice	Allen			
	Last Name	First Name	Maiden Name, if applicable	M.I.	Jr/Sr/III/IV
Check (x) if Individual Plaintiff is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style: Estate of _____					
Check (x) if Individual Plaintiff is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity: D/B/A or Agency _____					

Business

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate the state where incorporated

Check (x) if Business Plaintiff is filing suit in the name of an entity other than the above, and enter below:
D/B/A _____

Address of Plaintiff 102 Whispering Pine Drive, Gulfport MS 39503

Attorney (Name & Address) Brigg H. Austin, 1712 15th St., Ste. 300, Gulfport, MS 39501

MS Bar No. 104317

Check (x) if Individual Filing Initial Pleading is NOT an attorney

Signature of Individual Filing: _____

Defendant - Name of Defendant - Enter Additional Defendants on Separate Form

Individual					
	Last Name	First Name	Maiden Name, if applicable	M.I.	Jr/Sr/III/IV
Check (x) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style: Estate of _____					
Check (x) if Individual Defendant is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity: D/B/A or Agency _____					

Business Dismas Charities Properties Inc.

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate the state where incorporated

Check (x) if Business Defendant is acting in the name of an entity other than the above, and enter below:
D/B/A _____

Attorney (Name & Address) - If Known _____

MS Bar No. _____

Check (x) if child support is contemplated as an issue in this suit.*

*If checked, please submit completed Child Support Information Sheet with this Cover Sheet

Nature of Suit (Place an "X" in one box only)

<input type="checkbox"/> Domestic Relations <input type="checkbox"/> Child Custody/Visitation <input type="checkbox"/> Child Support <input type="checkbox"/> Contempt <input type="checkbox"/> Divorce: Fault <input type="checkbox"/> Divorce: Irreconcilable Diff. <input type="checkbox"/> Domestic Abuse <input type="checkbox"/> Emancipation <input type="checkbox"/> Modification <input type="checkbox"/> Paternity <input type="checkbox"/> Property Division <input type="checkbox"/> Separate Maintenance <input type="checkbox"/> Term. of Parental Rights-Chancery <input type="checkbox"/> UIFSA (eff 7/1/97; formerly URESA) <input type="checkbox"/> Other _____	<input type="checkbox"/> Business/Commercial <input type="checkbox"/> Accounting (Business) <input type="checkbox"/> Business Dissolution <input type="checkbox"/> Debt Collection <input type="checkbox"/> Employment <input type="checkbox"/> Foreign Judgment <input type="checkbox"/> Garnishment <input type="checkbox"/> Replevin <input type="checkbox"/> Other _____	<input type="checkbox"/> Probate <input type="checkbox"/> Accounting (Probate) <input type="checkbox"/> Birth Certificate Correction <input type="checkbox"/> Mental Health Commitment <input type="checkbox"/> Conservatorship <input type="checkbox"/> Guardianship <input type="checkbox"/> Heirship <input type="checkbox"/> Intestate Estate <input type="checkbox"/> Minor's Settlement <input type="checkbox"/> Muniment of Title <input type="checkbox"/> Name Change <input type="checkbox"/> Testate Estate <input type="checkbox"/> Will Contest <input type="checkbox"/> Alcohol/Drug Commitment (voluntary)	<input type="checkbox"/> Alcohol/Drug Commitment (involuntary) <input type="checkbox"/> Other _____	<input type="checkbox"/> Children/Minors - Non-Domestic <input type="checkbox"/> Adoption - Contested <input type="checkbox"/> Adoption - Uncontested <input type="checkbox"/> Consent to Abortion <input type="checkbox"/> Minor Removal of Minority <input type="checkbox"/> Other _____	<input type="checkbox"/> Civil Rights <input type="checkbox"/> Elections <input type="checkbox"/> Expungement <input type="checkbox"/> Habeas Corpus <input type="checkbox"/> Post Conviction Relief/Prisoner <input type="checkbox"/> Other _____	<input type="checkbox"/> Contract <input type="checkbox"/> Breach of Contract <input type="checkbox"/> Installment Contract <input type="checkbox"/> Insurance <input type="checkbox"/> Specific Performance <input type="checkbox"/> Other _____	<input type="checkbox"/> Statutes/Rules <input type="checkbox"/> Bond Validation <input type="checkbox"/> Civil Forfeiture <input type="checkbox"/> Declaratory Judgment <input type="checkbox"/> Injunction or Restraining Order <input type="checkbox"/> Other _____	<input type="checkbox"/> Real Property <input type="checkbox"/> Adverse Possession <input type="checkbox"/> Ejectment <input type="checkbox"/> Eminent Domain <input type="checkbox"/> Eviction <input type="checkbox"/> Judicial Foreclosure <input type="checkbox"/> Lien Assertion <input type="checkbox"/> Partition <input type="checkbox"/> Tax Sale: Confirm/Cancel <input type="checkbox"/> Title Boundary or Easement <input type="checkbox"/> Other _____	<input type="checkbox"/> Torts <input type="checkbox"/> Bad Faith <input type="checkbox"/> Fraud <input type="checkbox"/> Intentional Tort <input type="checkbox"/> Loss of Consortium <input type="checkbox"/> Malpractice - Legal <input type="checkbox"/> Malpractice - Medical <input type="checkbox"/> Mass Tort <input type="checkbox"/> Negligence - General <input checked="" type="checkbox"/> Negligence - Motor Vehicle <input type="checkbox"/> Product Liability <input type="checkbox"/> Subrogation <input type="checkbox"/> Wrongful Death <input type="checkbox"/> Other _____
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IN THE CIRCUIT COURT OF FORREST COUNTY, MISSISSIPPI

FIRST JUDICIAL DISTRICT, CITY OF

Docket No. _____
File Yr _____ Chronological No. _____ Clerk's Local ID _____Docket No. If Filed
Prior to 1/1/94 _____**DEFENDANTS IN REFERENCED CAUSE - Page 1 of _____ Defendants Pages
IN ADDITION TO DEFENDANT SHOWN ON CIVIL CASE FILING FORM COVER SHEET****Defendant #2:**Individual: _____
Last Name First Name (Maiden Name, if Applicable) M. Middle Init. Jr/Sr/III/IV

____ Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of _____

____ Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A _____

Business Dismas Charities, Inc.

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

____ Check (✓) if Business Defendant is being sued in the name of an entity other than the name above, and enter below:

D/B/A _____

ATTORNEY FOR THIS DEFENDANT: _____ Bar # or Name: _____ Pro Hac Vice (✓) _____ Not an Attorney(✓) _____

Defendant #3:Individual: _____
Last Name First Name (Maiden Name, if Applicable) M. Middle Init. Jr/Sr/III/IV

____ Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of _____

____ Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A _____

Business _____

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

____ Check (✓) if Business Defendant is being sued in the name of an entity other than the name above, and enter below:

D/B/A _____

ATTORNEY FOR THIS DEFENDANT: _____ Bar # or Name: _____ Pro Hac Vice (✓) _____ Not an Attorney(✓) _____

Defendant #4:Individual: _____
Last Name First Name (Maiden Name, if Applicable) M. Middle Init. Jr/Sr/III/IV

____ Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of _____

____ Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A _____

Business _____

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

____ Check (✓) if Business Defendant is being sued in the name of an entity other than the above, and enter below:

D/B/A _____

ATTORNEY FOR THIS DEFENDANT: _____ Bar # or Name: _____ Pro Hac Vice (✓) _____ Not an Attorney(✓) _____

MORRISBART, LTD

ATTORNEYS AT LAW

*Morris Bart, LA
Kenneth M. Altman, MS, LA, FL
Terry B. Loup, MS, LA, TX
Craig A. Gentry, MS, LA
Jason Ruiz, MS
Scott Bishop, MS
Susan Sanich, MS, AL
Ryan Canon, MS, AL
Melinda Parks, MS, AL
Lindsey Topp, MS, LA
Christopher Fitzgerald, MS
Andrew Reish, MS
Jessica Lennard, MS
Lauren Sullivan, MS, LA
Ida Henley, MS
Kanesha Johnson, MS

1712 15th Street, Suite 300
Gulfport, Mississippi 39501 2140

Writer's Direct Dial: (228) 574-4122
Writer's Direct Facsimile: (228) 400-1592
E-mail: baustin@morrisbart.com

December 14, 2020

Gwen Wilks
PO Box 992
Hattiesburg, MS 39403

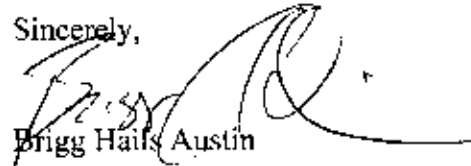
RE: Allen Brice v. Dismas Charlies Properties, Inc. et. al

Dear Ms. Wilks:

Enclosed please find a Civil Cover Sheet, and the original and one copy of the Summons, Return, and Complaint in the above-referenced matter. I respectfully request that you file these documents with the court. In addition, please return a conformed copy of the filed complaint to me in the self-addressed envelope I have enclosed. Also, please forward the original Summons and Return, and a service copy of the Complaint to my office so that service of process may be effected.

Please find enclosed our firm's check in the amount of \$160.00 made payable to the Clerk of Court to cover the cost of filing.

Sincerely,



Brigg Hails Austin

BHA

Enclosures: Civil Cover Sheet
Original & one copy of Summons and Return for each Defendant
Original & one copy of the Complaint
\$160.00 check for filing fee

OF COUNSEL
Beth Cocke, MS, TN
Mark Lumpkin, MS

*not licensed to practice
in Mississippi

ADMINISTRATOR
Mark Duhon

New Orleans
504.525.8800

Lake Charles
337.477.4600

Birmingham
205.251.6700

Baton Rouge
225.925.8800

Houston
281.539.8500

Gulfport
228.432.9000

Shreveport
337.222.9000

Montgomery
334.834.1800

Pascagoula
228.762.4700

www.morrisbart.com

Lafayette
337.233.4200

Little Rock
501.376.9000

Hattiesburg
601.583.8000

Monroe
337.807.1000

Texarkana
870.772.1669

Mobile
251.433.2210

Alexandria
318.561.7700

180

FILED
IN THE CIRCUIT COURT OF FORREST COUNTY, MISSISSIPPI

ALLEN BRICE

DEC 17 2020

PLAINTIFF

VS.

Forrest
FORREST COUNTY CIRCUIT CLERK **CAUSE NO:** 20-181

**DISMAS CHARITIES PROPERTIES, INC.,
DISMAS CHARITIES, INC., and DISMAS
EMPLOYEES "A" & "B"**

DEFENDANTS

COMPLAINT

JURY TRIAL REQUESTED

NOW INTO COURT, through undersigned counsel, come the Plaintiff, Allen Brice (hereinafter may be referred to as Plaintiff) who files this Complaint against the Defendants, Dismas Charities Properties, Inc. & Dismas Charities, Inc. (hereinafter Defendants) and shows this Honorable Court the following, to-wit:

PARTIES

I.

The Plaintiff, Allen Brice, is a person of majority and domiciled in Harrison County, State of Mississippi.

II.

Defendant, Dismas Charities Properties, Inc. & Dismas Charities, Inc., upon information and belief, are Kentucky companies doing business in the State of Mississippi who may be served by its Registered Agent, CT Corporation System, 645 Lakeland East Dr. Ste 101, Flowood Ms. pursuant to the Mississippi Rules of Civil Procedure.

Dismas Employee "A" is the individual who placed the hazard on the premises upon which the plaintiff slipped, and is an adult resident of the State of Mississippi.

Dismas Employee "B" is the individual who failed to warn of the hazard upon which Plaintiff slipped, and is an adult resident of the State of Mississippi.

JURISDICTION AND VENUE

III.

This cause of action occurred or accrued in Forrest County, Mississippi; and pursuant to the provisions Miss. Code Ann. §11-11-3, as amended, venue is proper in this Court. Further, this court has jurisdiction over this cause of action and the parties.

FACTS

V.

That on or about December 10, 2019, and at all times hereinafter mentioned Plaintiff, Allen Brice, was an invitee at the place of business of Dismas Charities Properties Inc. and/or Dismas Charities Inc. located at 5209 Hwy 42, Hattiesburg, MS 39401 in the County of Forrest, State of Mississippi.

VI.

While walking into the Annex Building on Defendant's property Plaintiff slipped and fell on the wet floor which resulted in serious injuries and damages sued on herein. The Employees of the Defendants' were aware that the floor was wet and slippery.

CAUSES OF ACTION

VII.

The employee(s) working for the Defendants failed to warn, failed to adequately warn or otherwise failed to notify the Plaintiff of the wet floor which they caused and/or they knew existed resulting injuries from the subject fall.

VIII.

The Defendants, Dismas Charities Properties, Inc. & Dismas Charities, Inc., were the entities responsible for maintaining the premises in a safe condition.

IX.

The aforesaid fall and incident sued on herein was the fault of, and proximately caused by the negligence of Defendants in the following, non-exclusive respects:

- a. By failing to maintain reasonable safe premises and/or failing to safely operate said business;
- b. In operating the business in an improper, unsafe, and negligent manner;
- c. In failing to warn and/or adequately warn the Plaintiff of a hidden danger that they caused;
- d. In failing to safely demarcate a danger in which they were aware of;
- e. By failing to see what should have been seen;
- f. In negligently training;
- g. In negligently failing to supervise;
- h. In negligently hiring and/or retaining;
- f. In violating the duties owed to a business invitee;
- g. In violating industry standards and building codes;
- h. In violating company policies and procedures;
- i. In violating the Revised Statutes of the State of Mississippi, all of which are pled as if copied herein in extenso; and
- j. All other acts of negligence and/or gross negligence which were the cause of the slip and fall incident sued upon and will be shown at the trial of this matter.

X.

On information and belief, at all relevant times herein, the employees of the Defendants were acting in the course and scope of their employment or as part of a joint venture or otherwise

for the benefit of Defendants. Under the theory of *respondeat superior*, both are responsible for the Plaintiff's fall and damages resulting thereto.

DAMAGES

XI.

That as a result of the aforesaid fall, Plaintiff, Allen Brice has sustained serious injuries including: a lumbar spine injury with radicular symptoms and other associated side effects.

XII.

As a result thereto, Plaintiff, Allen Brice, has suffered the following damages: bills for medical treatment, past and future; loss of wages past and future; physical pain and suffering including loss of enjoyment of life, past and future; permanent scarring and disfigurement (future), and mental and emotional distress, past and future.

XIII.

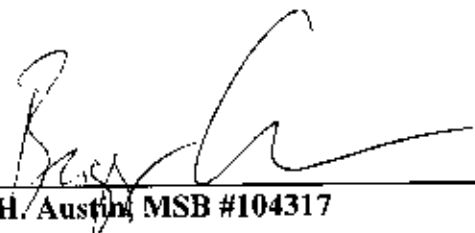
Plaintiff shows that she is entitled to a trial by jury on all issues raised herein, and prays for a trial by jury on all issues raised herein.

WHEREFORE, your Plaintiff prays that Defendants be served with a copy of this Complaint, and after being duly cited to appear and answer hereto, and after the expiration of all legal delays and due proceedings are had, that there be judgment rendered herein in favor of Plaintiff, and against Defendants, as alleged, together with legal interest, and for all costs of these proceedings including expert witness fees to be taxed as costs of court, and for all legal and equitable relief this honorable court shall deem appropriate. Further, a **TRIAL BY JURY** is requested on all issues raised herein.

RESPECTFULLY SUBMITTED, this the 16th day of December 2020.

PLAINTIFF, ALLEN BRICE

BY:



Brigg H. Austin MSB #104317

Brigg H. Austin
MORRIS BART
1712 15TH Street, Suite 300
Gulfport, Mississippi 39501
Tel.: 228-574-4122
Fax: 228-400-1592
ALLEN BRICE baustin@morrisbart.com

IN THE CIRCUIT COURT OF THE FORREST COUNTY, MISSISSIPPI

ALLEN BRICE

DEC 17 2020

PLAINTIFF

VS.

Shirley L. Brice
FORREST COUNTY CIRCUIT CLERK

CAUSE NO: 20-181

**DISMAS CHARITIES PROPERTIES, INC.,
DISMAS CHARITIES, INC., and DISMAS
EMPLOYEES "A" & "B"**

DEFENDANTS

SUMMONS

THE STATE OF MISSISSIPPI

**TO: DISMAS CHARTIES PROPERTIES INC.
& DISMAS CHARTIES INC.**

Via their registered agent:

C.T. CORPORATION SYSTEM

645 LAKELAND EAST DR STE 101

FLOWOOD, MS 39232

NOTICE TO DEFENDANT

THE COMPLAINT WHICH IS ATTACHED TO THIS SUMMONS IS IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.

You are required to mail or hand-deliver a copy of a written response to the Complaint to Brigg Austin, Esquire, the attorney for the Plaintiff, whose address is 1712 15th Street, Suite 300, Gulfport, MS, 39501.

Your response must be mailed or delivered within thirty (30) days from the date of delivery of this Summons and Complaint or a judgment by default will be entered against you for the money or other things demanded in the complaint.

You must file the original of your response with the Clerk of this Court within a reasonable time afterward.

Issued under my hand and the seal of said Court, this ____ day of _____, 2016.

CIRCUIT CLERK OF FORREST COUNTY

BY: _____ D.C.

IN THE CIRCUIT COURT OF FORREST COUNTY, MISSISSIPPI

ALLEN BRICE

PLAINTIFF

VS.

CAUSE NO: _____

**DISMAS CHARITIES PROPERTIES, INC.,
DISMAS CHARITIES, INC., and DISMAS
EMPLOYEES "A" & "B"**

DEFENDANTS

RETURN

DISMAS CHARTIES PROPERTIES INC.

&

DISMAS CHARTIES INC.

Via their registered agent:

C T CORPORATION SYSTEM

645 LAKELAND EAST DR STE 101

FLOWOOD, MS 39232

I, the Undersigned process server, served the summons, complaint and discovery upon the person or entity named above in the manner set forth below (process server must check proper space and provide all additional information that is requested and pertinent to the mode of service used):

() **FIRST CLASS MAIL AND ACKNOWLEDGMENT SERVICE.** By mailing (by first class mail, postage prepaid), on the date stated in the attached Notice, copies to the person served, together with copies of the form of notice and acknowledgment and return envelope, postage prepaid, addressed to the sender.

() **PERSONAL SERVICE.** I personally delivered copies of the summons, complaint and discovery on the _____ day of _____, 2016, to:

() **RESIDENCE SERVICE.** After exercising reasonable diligence I was unable to deliver copies to said person within _____ county, Mississippi. I served the summons, complaint and discovery on the _____ day of _____, 2016, at the usual place of abode of said person by leaving a true copy of the summons, complaint and discovery with who is the _____ (insert wife, husband, son, daughter or other person as the case may be), a member of the family of the person served above the age of sixteen years, and willing to receive the summons, complaint and discovery and thereafter, on the day of _____, 2016. I mailed (by first class mail, postage prepaid) copies to the person served at his or her usual place of abode where the copies were left.

() CERTIFIED MAIL SERVICE. By mailing to an address outside Mississippi (by first class mail, postage prepaid, requiring a return receipt) copies to the person served. (Attach signed return receipt or other evidence of actual delivery to the person served).

At the time of service I was at least 18 years of age and not a party to this action.

Fee for service: \$ _____

Name: _____

Address: _____

Soc. Sec. No.: _____ Telephone No.: _____

State of Mississippi

County of _____

Personally appeared before me the undersigned authority in and for the state and county aforesaid, the within named _____ who being first by me duly sworn states on oath that the matters and facts set for in the foregoing "Proof of Service-Summons" are true and correct as therein stated.

Process Server

Sworn to and subscribed before me on this the ____ day of _____, 2016.

Notary Public

(Seal) My commission Expires:

IN THE CIRCUIT COURT OF FORREST COUNTY, MISSISSIPPI

ALLEN BRICE

DEC 17 2020

PLAINTIFF

VS.

Shirley L. Smith
FORREST COUNTY CIRCUIT CLERK

CAUSE NO: 20-181

**DISMAS CHARITIES PROPERTIES, INC.,
DISMAS CHARITIES, INC., and DISMAS
EMPLOYEES "A" & "B"**

DEFENDANTS

PLAINTIFF'S ELECTION FORM FOR SERVICE OF PROCESS

Plaintiff, through undersigned counsel, hereby select service of process on Defendant by the method indicated below:

- A. ☐ By the Sheriff of the county in which the Defendant(s) reside for service under subparagraph (c)(2) of Rule 4 of the Mississippi Rules of Civil Procedure.
- B. ☐ By a Process Server selected by the plaintiff who is not a party and is not less than 18 years of age for service under subparagraphs (c)(1) of Rule 4 of the Mississippi Rules of Civil Procedure.
- C. ☒ By Mail as provided by (c)(3) or (c)(5) Rule 4 of the Mississippi Rules of Civil Procedure.
- D. ☐ By Publication as authorized under subparagraph (c)(4) of Rule 4 of the Mississippi Rules of Civil Procedure.
- E. ☐ Do not issue Summons in this case as it is my intention to get a waiver from the defendant(s). The waiver will be filed as soon as it is secured.

Submitted on the 16th day of December, 2020.

Brigg Austin
Brigg Austin, NO. 104317
ATTORNEY FOR THE PLAINTIFF

IN THE CIRCUIT COURT OF FORREST COUNTY, MISSISSIPPI

ALLEN BRICE

PLAINTIFF

VS.

CAUSE NO: 20-181

**DISMAS CHARITIES PROPERTIES, INC.,
DISMAS CHARITIES, INC., and DISMAS
EMPLOYEES "A" & "B"**

DEFENDANTS

PLAINTIFF'S NOTICE OF SERVICE OF DISCOVERY

Notice is hereby given that the Plaintiffs, have this date mailed via certified mail in the above entitled action:

1. Plaintiff's First Requests for Interrogatories and Requests for Production of Documents propounded to Defendant.

RESPECTFULLY SUBMITTED, this the 22nd day of December 2020.

COUNSEL FOR THE PLAINTIFF

/s/ Brigg Austin

BRIGG AUSTIN, MSB # 104317

MORRIS BART, LTD.

1712 15TH Street, Suite 300

Gulfport, MS 39501

Telephone: (228) 574-4122

Fax: (228) 400-1592

IN THE CIRCUIT COURT OF THE FIRST JUDICIAL DISTRICT OF FORREST COUNTY, MISSISSIPPI

ALLEN BRICE

DEC 17 2020

PLAINTIFF

VS.

Shirley L. Brice
FORREST COUNTY CIRCUIT CLERK

CAUSE NO: 20-181

**DISMAS CHARITIES PROPERTIES, INC.,
DISMAS CHARITIES, INC., and DISMAS
EMPLOYEES "A" & "B"**

DEFENDANTS

SUMMONS

THE STATE OF MISSISSIPPI

**TO: DISMAS CHARTIES PROPERTIES INC.
& DISMAS CHARTIES INC.**

Via their registered agent:

C.T. CORPORATION SYSTEM

645 LAKELAND EAST DR STE 101

FLOWOOD, MS 39232

NOTICE TO DEFENDANT

THE COMPLAINT WHICH IS ATTACHED TO THIS SUMMONS IS IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.

You are required to mail or hand-deliver a copy of a written response to the Complaint to Brigg Austin, Esquire, the attorney for the Plaintiff, whose address is 1712 15th Street, Suite 300, Gulfport, MS, 39501.

Your response must be mailed or delivered within thirty (30) days from the date of delivery of this Summons and Complaint or a judgment by default will be entered against you for the money or other things demanded in the complaint.

You must file the original of your response with the Clerk of this Court within a reasonable time afterward.

Issued under my hand and the seal of said Court, this ____ day of _____, 2016.

CIRCUIT CLERK OF FORREST COUNTY

BY: _____ D.C.

IN THE CIRCUIT COURT OF FORREST COUNTY, MISSISSIPPI

ALLEN BRICE

PLAINTIFF

VS.

CAUSE NO: _____

**DISMAS CHARITIES PROPERTIES, INC.,
DISMAS CHARITIES, INC., and DISMAS
EMPLOYEES "A" & "B"**

DEFENDANTS

RETURN

DISMAS CHARTIES PROPERTIES INC.

&

DISMAS CHARTIES INC.

Via their registered agent:

C T CORPORATION SYSTEM

645 LAKELAND EAST DR STE 101

FLOWOOD, MS 39232

I, the Undersigned process server, served the summons, complaint and discovery upon the person or entity named above in the manner set forth below (process server must check proper space and provide all additional information that is requested and pertinent to the mode of service used):

☒ **FIRST CLASS MAIL AND ACKNOWLEDGMENT SERVICE.** By mailing (by first class mail, postage prepaid), on the date stated in the attached Notice, copies to the person served, together with copies of the form of notice and acknowledgment and return envelope, postage prepaid, addressed to the sender.

☐ **PERSONAL SERVICE.** I personally delivered copies of the summons, complaint and discovery on the _____ day of _____, 2016, to:

☐ **RESIDENCE SERVICE.** After exercising reasonable diligence I was unable to deliver copies to said person within _____ county, Mississippi. I served the summons, complaint and discovery on the _____ day of _____, 2016, at the usual place of abode of said person by leaving a true copy of the summons, complaint and discovery with who is the _____ (insert wife, husband, son, daughter or other person as the case may be), a member of the family of the person served above the age of sixteen years, and willing to receive the summons, complaint and discovery and thereafter, on the day of _____, 2016. I mailed (by first class mail, postage prepaid) copies to the person served at his or her usual place of abode where the copies were left.

(X) CERTIFIED MAIL SERVICE. By mailing to an address outside Mississippi (by first class mail, postage prepaid, requiring a return receipt) copies to the person served. (Attach signed return receipt or other evidence of actual delivery to the person served).

At the time of service I was at least 18 years of age and not a party to this action.

Fee for service: \$ _____

Name: _____

Address: _____

Soc. Sec. No.: _____ Telephone No.: _____

State of Mississippi

County of _____

Personally appeared before me the undersigned authority in and for the state and county aforesaid, the within named _____ who being first by me duly sworn states on oath that the matters and facts set for in the foregoing "Proof of Service-Summons" are true and correct as therein stated.

Process Server

Sworn to and subscribed before me on this the ____ day of _____, 2016.

Notary Public

(Seal) My commission Expires:

IN THE CIRCUIT COURT OF FORREST COUNTY, MISSISSIPPI

ALLEN BRICE

DEC 17 2020

PLAINTIFF

VS.

Shirley L. Smith
FORREST COUNTY CIRCUIT CLERK

CAUSE NO: 20-181

**DISMAS CHARITIES PROPERTIES, INC.,
DISMAS CHARITIES, INC., and DISMAS
EMPLOYEES "A" & "B"**

DEFENDANTS

PLAINTIFF'S ELECTION FORM FOR SERVICE OF PROCESS

Plaintiff, through undersigned counsel, hereby select service of process on Defendant by the method indicated below:

- A. ☐ By the Sheriff of the county in which the Defendant(s) reside for service under subparagraph (c)(2) of Rule 4 of the Mississippi Rules of Civil Procedure.
- B. ☐ By a Process Server selected by the plaintiff who is not a party and is not less than 18 years of age for service under subparagraphs (c)(1) of Rule 4 of the Mississippi Rules of Civil Procedure.
- C. ☒ By Mail as provided by (c)(3) or (c)(5) Rule 4 of the Mississippi Rules of Civil Procedure.
- D. ☐ By Publication as authorized under subparagraph (c)(4) of Rule 4 of the Mississippi Rules of Civil Procedure.
- E. ☐ Do not issue Summons in this case as it is my intention to get a waiver from the defendant(s). The waiver will be filed as soon as it is secured.

Submitted on the 16th day of December, 2020.

Brigg Austin
Brigg Austin, NO. 104317
ATTORNEY FOR THE PLAINTIFF



December 28, 2020

Dear Elizabeth Cole:

The following is in response to your request for proof of delivery on your item with the tracking number:
9171 9690 0935 0222 4910 72.

Item Details

Status:	Delivered to Agent for Final Delivery
Status Date / Time:	December 26, 2020, 9:34 am
Location:	FLOWOOD, MS 39232
Postal Product:	First-Class Mail®
Extra Services:	Certified Mail™
	Return Receipt Electronic

Recipient Signature

Signature of Recipient:
(Authorized Agent)

Address of Recipient:

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

Thank you for selecting the United States Postal Service® for your mailing needs. If you require additional assistance, please contact your local Post Office™ or a Postal representative at 1-800-222-1811.

Sincerely,
United States Postal Service®
475 L'Enfant Plaza SW
Washington, D.C. 20260-0004